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U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF James Leberton	COURT CASE NUMBER 21-CV-04203
City Commissioner's of Philadelphia Ct	TYPE OF PROCESS
SERVE NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCR	IPTION OF PROPERTY TO SEIZE OR CONDEND!
Philadelphia City Commissionels Of ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	fice (Lisa Deeley)
AT 132 City Hall, Philadelphia Pa	19107
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	ber of process to be
serve Yalverton #OF0921 serve	d with this Form - 285
SCI_ Houtzdelle Num	ber of parties to be
209 Institution Dave	d in this case
	k for service S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE Telephone Numbers, and Estimated Times Available For Service):	(Include Business and Alternate Addresses, All
Service of form USM-285 with complaint should be served upon Fold	
Selvice of form Usin-2005 with compliand shows so server afore	
there office.	
Signature of Attorney or other Ωriginaton requesting service on behalf of:	PHONE NUMBER DATE
PLAINTIFF DEFENDANT	1/8/2022
CDA CON DEL CALLACTOR AND	10/11 /1/0/0
ON OUZ OF CISHMARDIAE ONE! — BO NO	THE BELOW THIS EXITE
I acknowledge receipt for the total number of process indicated. Total Process District District Signature of Authorized US of Origin	MS Deputy or Clerk Date
(Sign only first USM 285 if more than one USM 285 is submitted) No No	
I hereby certify and return that I \(\subseteq \text{have personally served, whave legal evidence of service, } \subseteq have executed on the individual common to the contract of the	
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporati	on, etc., shown at the address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and dis-
agros Colon-Duta Survices Support derk City of Phila	cretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above) 1515 Arch St 14th F1 Law Dep.	Date of Service Time am
	3/3/ 23 12:43 (m)
Phila., PA. 19102 Tort Lit. Unit	Signature of U.S. Marchal or Deputy
	(eH)
- (including endeavors)	owed to U.S. Marshal or Amount of Refund
65.00	
REMARKS:	